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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Andrell First name Dicole Middle name		First name Middle name
	Bring your picture identification to your meeting with the trustee.	Hall Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Andrell D Hall Andrell Hall		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0147		

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Debtor 1 Andrell Dicole Hall

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		2950 S Cobb Drive Apt 21-4 Smyrna, GA 30080			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		County County	County		
		·	·		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
this district to file for bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Andrell Dicole Hall

Case number (if known)

Par					Matic - D	and and be stated to the	O C 040/h) (! !' ! !	colo Filippo fon De alemente	
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and o			.C. § 342(b) for Individu	uals Filing for Bankruptcy	
	choosing to file under	■ Chapter 7 □ Chapter 11							
		□с	hapter 12						
		□с	hapter 13						
8.	How you will pay the fee		about how you	u may pay. Typically, if you a attorney is submitting your p	are paying	the fee yourself,	you may pay with cash	r local court for more details n, cashier's check, or money h a credit card or check with	
			I need to pay	the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay	
			ū	e in Installments (Official For	,	this option only i	f you are filing for Char	otor 7. By law, a judgo may	
			but is not requ	ired to, waive your fee, and	may do so	only if your inco	me is less than 150%	oter 7. By law, a judge may, of the official poverty line that	
				r family size and you are un n to Have the Chapter 7 Fili				this option, you must fill out	
								, y - a p - a	
9.	Have you filed for		O.						
	bankruptcy within the last 8 years?	■ Ye	es.						
			District	Northern District of Georgia - Atlanta Division	When	5/04/18	Case number	18-57715	
				Northern District of					
			5	Georgia - Atlanta		0/25/47		47 C400C	
			District	Division	When	8/25/17	Case number	17-64906	
			District		When		Case number		
10.	Are any bankruptcy	■ No	 o						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.						
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.	Do you rent your		o. Go to li	ne 12.					
	residence?	■ Ye		ur landlord obtained an evict	tion judgm	ent against you?			
				No. Go to line 12.	-	-			
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this	

Debtor 1 Andrell Dicole Hall Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach			per, Street, City, State & ZIP Code	
	it to this petition.			k the appropriate box to describe your business:	
				Health Care Business (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in 11 U.S.C. § 101(53A))	
				Commodity Broker (as defined in 11 U.S.C. § 101(6))	
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that in deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, in 11 U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am r	not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.	illing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy .	
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pari	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention	
	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property? Number, Street, City, State & Zip Code	
				Number, Street, City, State & Zip Code	

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Debtor 1 **Andrell Dicole Hall**

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-56657-jrs Doc 1 Filed 04/30/19 Entered 04/30/19 15:18:23 **Desc Main** Document Page 6 of 61 Case number (if known) Debtor 1 **Andrell Dicole Hall** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11,

United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Andrell Dicole Hall Signature of Debtor 1	Signature of Debtor 2		
Executed on April 30, 2019 MM / DD / YYYY	Executed on MM / DD / YYYY		

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Debtor 1 Andrell Dicole Hall Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christo	pher J. Kiefer, GA Bar No.	Date	April 30, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Christophe Printed name	er J. Kiefer, GA Bar No. 417247			
Clark & W	ashington, L.L.C.			
Firm name				
3300 North	neast Expressway			
Building 3				
Atlanta, G.	A 30341			
Number, Street,	City, State & ZIP Code			
Contact phone	770-488-9338	Email address	cworders@cw13.com	
GA				
Bar number & S	tate			

Andrell Dicale Hel						
First Name	Middle Name	Last Name				
First Name	Middle Name	Last Name				
Bankruptcy Court for the:						
			☐ Check if this is an amended filing			
407						
	ffaire for Individual	s Eiling for Bankruptov	4/4			
more space is needed, at	ttach a separate sheet to this fo					
, , , , , ,		Defere				
		Before				
our current marital status	?					
ed						
arried						
During the last 3 years, have you lived anywhere other than where you live now?						
ist all of the places you live	ed in the last 3 years. Do not inclu	de where you live now.				
ist all of the places you live	ed in the last 3 years. Do not inclu Dates Debtor 1 lived there	de where you live now. Debtor 2 Prior Address:	Dates Debtor 2 lived there			
, ,	Dates Debtor 1	•				
Prior Address:	Dates Debtor 1 lived there From-To:	Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1			
	First Name First Name Sankruptcy Court for the: Orm 107 It of Financial A e and accurate as possible more space is needed, and and accurate as possible more space is needed, and and accurate as possible more space is needed, and and accurate as possible more space is needed, and and accurate as possible more space is needed, and an accurate as possible more space is needed, and accurate as possible more space is needed.	Sankruptcy Court for the: NORTHERN DISTRICT OF GEO Orm 107 It of Financial Affairs for Individual e and accurate as possible. If two married people are fillir more space is needed, attach a separate sheet to this fown). Answer every question. Details About Your Marital Status and Where You Lived our current marital status?	First Name Middle Name Last Name Sankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION Orm 107 It of Financial Affairs for Individuals Filing for Bankruptcy and accurate as possible. If two married people are filing together, both are equally responsioner space is needed, attach a separate sheet to this form. On the top of any additional page wn). Answer every question. Details About Your Marital Status and Where You Lived Before our current marital status?			

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Case number (if known) Document Debtor 1 Andrell Dicole Hall

Part 2 Expl	ain the Sources of You	r Income			
Fill in the to	otal amount of income yo	u received from all jobs and a	g a business during this ye all businesses, including part- e together, list it only once un		dar years?
□ No					
Yes. F	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,096.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
For last calend (January 1 to I	dar year: December 31, 2018)	■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	ar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Include include include and other pwinnings. If List each some No	ome regardless of wheth public benefit payments; p you are filing a joint cas	pensions; rental income; inter e and you have income that y me from each source separa	amples of other income are all	•	
		Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
		Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
Part 3: List	Certain Payments You	Made Before You Filed for I	Bankruptcy		
	Neither Debtor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
	No. Go to line 7.		d you pay any creditor a total		oo total amazint in
	paid that cre not include	editor. Do not include paymer payments to an attorney for the	nts for domestic support obligation is bankruptcy case.	n one or more payments and the ations, such as child support a corrupt after the date of adjustment.	nd alimony. Also, do

Case 19-56657-jrs Doc 1 Filed 04/30/19 Entered 04/30/19 15:18:23 Desc Main Page 10 of 61 Document Case number (if known) Debtor 1 Andrell Dicole Hall Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe **Bridgecrest Credit Company, LLC** 02/2019: \$477 \$477.00 \$15,946.00 ☐ Mortgage Attn: Bankruptcy Car 7300 E Hampton Ave, Ste 100 ☐ Credit Card Mesa, AZ 85209 ☐ Loan Repayment ☐ Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Reason for this payment Dates of payment Total amount Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date

Explain what happened

property

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Debtor 1 Andrell Dicole Hall

	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		
	Santander Consumer USA Inc. PO Box 961245	2011 Hyundai Elantra 200000	04/2019	\$0.00
	Fort Worth, TX 76161	■ Property was repossessed.		
		☐ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	accounts or refuse to make a payment No	kruptcy, did any creditor, including a bank or financial in because you owed a debt?	stitution, set off any a	amounts from your
	Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	court-appointed receiver, a custodian, No	uptcy, was any of your property in the possession of an or another official?	assignee for the ben	efit of creditors, a
	☐ Yes			
	t 5: List Certain Gifts and Contribution Within 2 years before you filed for bank	ons cruptcy, did you give any gifts with a total value of more t	than \$600 per person	?
	No			
	☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$6	Describe the gifts	Dates you gave	Value
	per person	3000 mo g	the gifts	7 3.40
	Person to Whom You Gave the Gift an Address:	d		
1 /	Within 2 years before you filed for bonk	rruntov, did vou givo ony gifto or contributions with a tot	al value of more than	\$600 to any abarity?
14.	_	cruptcy, did you give any gifts or contributions with a tot	ai value of more than	\$600 to any charity?
	No	and the office		
	Yes. Fill in the details for each gift or			
	Gifts or contributions to charities that	total Describe what you contributed	Dates you	Value
	more than \$600 Charity's Name		contributed	
	Address (Number, Street, City, State and ZIP Co	de)		
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankr or gambling?	uptcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ Na			
	No			
	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost

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Debtor 1 Andrell Dicole Hall

Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, diconsulted about seeking bankruptcy or preparir Include any attorneys, bankruptcy petition preparers	ng a bankruptcy petition?			ty to anyone you
	□ No ■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount o
	CIN Legal Data Services Box 88229 Milwaukee, WI 53288 Clark & Washington, LLC	Various Pre-bankruptcy Service	es	04/2019	\$70.0
17.	Within 1 year before you filed for bankruptcy, dipromised to help you deal with your creditors of Do not include any payment or transfer that you list. No	r to make payments to your creditors		r transfer any proper	ty to anyone who
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount o
18.	Within 2 years before you filed for bankruptcy, of transferred in the ordinary course of your busin include both outright transfers and transfers made a include gifts and transfers that you have already list. No Yes. Fill in the details.	ess or financial affairs? as security (such as the granting of a sec			
	Person Who Received Transfer Address	Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you			3.	
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protection No		f-settled tru	st or similar device o	of which you are a
	Yes. Fill in the details.	Description and value of the proper	tu transfarra	, d	Data Transfer was
	Name of trust	Description and value of the proper	ty transferre	ea	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instrur	nents, Safe Deposit Boxes, and Stora	ge Units		
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or oth houses, pension funds, cooperatives, association. No Yes. Fill in the details.	ner financial accounts; certificates of		•	, ,

Type of account or

instrument

Date account was

closed, sold,

moved, or

transferred

Last 4 digits of

account number

Name of Financial Institution and

Address (Number, Street, City, State and ZIP Code)

Last balance

transfer

before closing or

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Debtor 1 Andrell Dicole Hall

	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer							
	Suntrust Bank Legal Dept/Bankruptcy PO Box 85041 Richmond, VA 23286	xxxx-	■ Checking □ Savings □ Money Mark □ Brokerage □ Other		04/2018	\$0.00							
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?												
	■ No □ Yes. Fill in the details.												
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe th	e contents	Do you still have it?							
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?												
	■ No □ Yes. Fill in the details.												
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe th	e contents	Do you still have it?							
Par	t 9: Identify Property You Hold or Control	•											
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property	y you borro	wed from, are storing	for, or hold in trust							
	■ No □ Yes. Fill in the details.												
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe th	e property	Value							
Par	t 10: Give Details About Environmental Info	,											
For	the purpose of Part 10, the following definition	ons apply:											
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	ne air, land, soil, surfac	e water, groundv										
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	-	environmental la	w, whether	you now own, operat	e, or utilize it or used							
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardous v	waste, haza	rdous substance, tox	ic substance,							
Rep	ort all notices, releases, and proceedings that	at you know about, reg	ardless of when t	they occurr	ed.								
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable u	under or in	violation of an enviror	mental law?							
	■ No □ Yes. Fill in the details.												
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S		Environ know it	mental law, if you	Date of notice							

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Debtor 1 Andrell Dicole Hall

25. Have you notified any governmental unit of any release of hazardous material?											
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmer ow it	ntal law, if you	Date of notice					
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envir	onment	tal law?	Include settlements	and orders.					
	■ No □ Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the ca	ase	Status of the case					
Par	t 11: Give Details About Your Business or 0	Connections to Any Business									
27.	Within 4 years before you filed for bankrupte	cy, did you own a business or have any	of the	followin	g connections to an	y business?					
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity, o	either fu	ull-time o	or part-time						
	■ A member of a limited liability comp	any (LLC) or limited liability partnershi	p (LLP)								
	☐ A partner in a partnership										
	☐ An officer, director, or managing executive of a corporation										
	☐ An owner of at least 5% of the voting or equity securities of a corporation										
	No. None of the above applies. Go to Part 12.										
	Yes. Check all that apply above and fill in the details below for each business.										
	Business Name Address	Describe the nature of the business			Identification numbe lude Social Security						
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper Interior Design		Dates business existed							
	Design Amore Interiors, LLC			EIN: 81-3110570							
	2950 South Cobb Drive Smyrna, GA 30080			From-To 01/2017 - Present							
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	cy, did you give a financial statement to	o anyon	e about	your business? Incl	ude all financial					
	■ No										
	Yes. Fill in the details below.										
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued									
Par	t 12: Sign Below										
are t	ve read the answers on this <i>Statement of Fin</i> true and correct. I understand that making a sabankruptcy case can result in fines up to \$1.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, o	r obtair	ning mor							
An	Andrell Dicole Hall drell Dicole Hall nature of Debtor 1	Signature of Debtor 2									
Dat	e April 30, 2019	Date									
Did ;	you attach additional pages to Your Stateme	nt of Financial Affairs for Individuals F	iling for	Bankru	ptcy (Official Form 1	07)?					

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Debtor 1 Andrell Dicole Hall

□Yes	
Did you pay or agree to pay s	omeone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

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	<u> </u>	Document	Page 16 of 61		
Fill in this info	rmation to identify your ca	ase and this filing:			
Debtor 1	Andrell Dicole Hall				
200101 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF GE	EORGIA - ATLANTA DIVIS	ION	
Case number					Observativity is a second
Case Hullibel					☐ Check if this is an amended filing
					g
o	4004/5				
Official F	orm 106A/B				
Schedu	le A/B: Prope	erty			12/15
think it fits best. nformation. If mo Answer every qu	Be as complete and accurate ore space is needed, attach a estion.	items. List an asset only once. It is as possible. If two married peopseparate sheet to this form. On Land, or Other Real Estate You	ple are filing together, both a the top of any additional pag	re equally responsible for s	supplying correct
. Do you own o	r have any legal or equitable i	interest in any residence, buildin	g, land, or similar property?		
■ No. Go to P	art 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	e Your Vehicles				
□ No ■ Yes					
3.1 Make:	Chevrolet	Who has an interest in	the property? Cheek are	Do not deduct secured	claims or exemptions. Put
	Sonic	<u> </u>	the property? Check one		red claims on Schedule D: aims Secured by Property.
Model: Year:	2017	Debtor 1 only ☐ Debtor 2 only			, , ,
	ate mileage: 690		2 only	Current value of the entire property?	Current value of the portion you own?
Other info	ormation:	At least one of the de	•		
		Check if this is com	munity property	\$8,475.00	\$8,475.00
Examples: Bo ■ No □ Yes 5 Add the dol pages you	pats, trailers, motors, person llar value of the portion you have attached for Part 2. V we Your Personal and Housel	Vs and other recreational vertical watercraft, fishing vessels, so own for all of your entries write that number here	snowmobiles, motorcycle a	y entries for	\$8,475.00 Current value of the
, 0	July gai or oquitar				
					portion you own? Do not deduct secured

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 19-56657-jrs Doc 1 Filed 04/30/19 Entered 04/30/19 15:18:23 Document Page 17 of 61 Case number (if known) Debtor 1 **Andrell Dicole Hall** Yes. Describe..... \$1,000.00 2 Bedroom, Dining Room Table Table, Chairs, Household Accessories \$350.00 \$1,000.00 Living Room Set 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$1,000.00 TV, DVD, Laptop, iPad, Cellphone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... \$200.00 Painting by Local Artist 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No Yes. Describe..... \$50.00 **Exercise Pole** 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$500.00 Clothes and shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No

Yes. Describe.....

\$500.00

Costume Jewelry

Entered 04/30/19 15:18:23 Case 19-56657-jrs Doc 1 Filed 04/30/19 **Desc Main** Document Page 18 of 61 Debtor 1 Case number (if known) **Andrell Dicole Hall** Dog \$50.00 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4.650.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Wells Fargo Bank \$100.00 Checking Wells Fargo Bank \$175.00 Savings 17.2. **Chase Bank** \$0.00 17.3. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

□ No

Yes. List each account separately.

Type of account:

Institution name:

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Case number (if known) Document Debtor 1 **Andrell Dicole Hall**

		401(K)	Opers Retirement Account	\$1,500.00
22	_Examples: Agreeme	used deposits you have made	e so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications compani	es, or others
	□ No ■ Yes		Institution name or individual:	
		Rent Deposit	Lexington Park Apartments	\$1,300.00
23	_	ct for a periodic payment of mo	oney to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and description	1.	
24		ation IRA, in an account in a 1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition prog	gram.
	☐ Yes	Institution name and descrip	tion. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	■ No	future interests in property information about them	(other than anything listed in line 1), and rights or powers exer	cisable for your benefit
26	5. Patents, copyrights Examples: Internet of	, trademarks, trade secrets,	, and other intellectual property ceeds from royalties and licensing agreements	
27	 Licenses, franchise Examples: Building 	s, and other general intangi	ibles ooperative association holdings, liquor licenses, professional license	s
M	loney or property owe			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax refunds owed t	o you		
	■ No □ Yes. Give specific	information about them, include	ding whether you already filed the returns and the tax years	
29	Family support Examples: Past due No ☐ Yes. Give specific		al support, child support, maintenance, divorce settlement, property s	settlement
30		ages, disability insurance pay unpaid loans you made to so	yments, disability benefits, sick pay, vacation pay, workers' compens meone else	sation, Social Security
31	. Interests in insuran Examples: Health, d		alth savings account (HSA); credit, homeowner's, or renter's insurance	ce
		urance company of each polic Company name:	cy and list its value. Beneficiary:	Surrender or refund

Official Form 106A/B Schedule A/B: Property page 4 Case 19-56657-jrs Doc 1 Filed 04/30/19 Entered 04/30/19 15:18:23

Page 20 of 61 Document Case number (if known) Debtor 1 **Andrell Dicole Hall** \$0.00 **Progressive Auto Insurance Policy Andrell Hall** \$0.00 **Aetna Health Insurance Policy Andrell Hall Employer-provided Term Life** Andrea Whaley, **Insurance Policy** Cynthia Stallworth, Leo \$0.00 Hall Sr. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No ■ Yes. Describe each claim....... personal injury claim from accident Unknown 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$3,075.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B

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Case number (if known) Document Debtor 1 **Andrell Dicole Hall**

Part	8: List the Totals of Each Part of this Form	<u>.</u>		
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$8,475.00		
57.	Part 3: Total personal and household items, line 15	\$4,650.00		
58.	Part 4: Total financial assets, line 36	\$3,075.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$16,200.00	Copy personal property total	\$16,200.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$16,200.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor	mation to identify your	case:			
Debtor 1	Andrell Dicole Ha	ıll			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA - ATLANTA DI	IVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$8,475.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(3)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$350.00		\$350.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$0.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
	\$1,000.00	\$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00	Standard Schedule A/B \$8,475.00 \$5,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$350.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00

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Document

btor 1	Andrell Dicole Hall	Document	F	Page 23 of 61 Case number (if known)	
Brief o	description of the property and line on dule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim	Specific laws that allow exemption
Pain	ting by Local Artist	Schedule A/B \$200.00		\$200.00	O.C.G.A. § 44-13-100(a)(6)
	from Schedule A/B: 8.1	\$200.00	_	100% of fair market value, up to any applicable statutory limit	
	cise Pole	\$50.00		\$50.00	O.C.G.A. § 44-13-100(a)(6)
	on concare to B. C.			100% of fair market value, up to any applicable statutory limit	
	hes and shoes from Schedule A/B: 11.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(4)
				100% of fair market value, up to any applicable statutory limit	
	tume Jewelry from Schedule A/B: 12.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(5)
				100% of fair market value, up to any applicable statutory limit	
Dog Line f	from Schedule A/B: 13.1	\$50.00		\$50.00	O.C.G.A. § 44-13-100(a)(4)
				100% of fair market value, up to any applicable statutory limit	
	cking: Wells Fargo Bank	\$100.00		\$100.00	O.C.G.A. § 44-13-100(a)(6)
				100% of fair market value, up to any applicable statutory limit	
	ngs: Wells Fargo Bank	\$175.00		\$175.00	O.C.G.A. § 44-13-100(a)(6)
				100% of fair market value, up to any applicable statutory limit	
	cking: Chase Bank	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(6)
				100% of fair market value, up to any applicable statutory limit	
•	K): Opers Retirement Account from Schedule A/B: 21.1	\$1,500.00		\$1,500.00	O.C.G.A. § 44-13-100(a)(2.1)
				100% of fair market value, up to any applicable statutory limit	
	Deposit: Lexington Park	\$1,300.00		\$1,300.00	O.C.G.A. § 44-13-100(a)(6)
	from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	ressive Auto Insurance Policy eficiary: Andrell Hall	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(6)
	from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	a Health Insurance Policy eficiary: Andrell Hall	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(6)
	from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Andrell Dicole Hall

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Employer-provided Term Life** O.C.G.A. § 44-13-100(a)(8) \$0.00 \$0.00 **Insurance Policy** 100% of fair market value, up to Beneficiary: Andrea Whaley, Cynthia Stallworth, Leo Hall Sr. any applicable statutory limit Line from Schedule A/B: 31.3 personal injury claim from accident O.C.G.A. § 44-13-100(a)(6) \$0.00 Unknown Line from Schedule A/B: 33.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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	0000 10 00001]	Document Page 25	of 61		Wichii
Fill ir	n this information to identify	our case:			
Debte	7				
5	First Name	Middle Name Last Name			
Debte (Spous	or 2 se if, filing) First Name	Middle Name Last Name			
Unite	d States Bankruptcy Court for t	he: NORTHERN DISTRICT OF GEORGIA - ATL	ANTA DIVISION		
Case (if know	number wn)			☐ Check	if this is an
`					ded filing
~ ···	: LE 400B				
	cial Form 106D				
Scł	nedule D: Credito	rs Who Have Claims Secured	d by Property	1	12/15
is nee		le. If two married people are filing together, both are eq it out, number the entries, and attach it to this form. On			
	any creditors have claims secure	by your property?			
_		it this form to the court with your other schedules. Yo	ou have nothing else to	report on this form.	
_	Yes. Fill in all of the informati	•	· · · · · · · · · · · · · · · · · ·		
Part		on bolow.			
		and the second s	Column A	Column B	Column C
for ea	ch claim. If more than one creditor	as more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As petical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	American First Finance	Describe the property that secures the claim:	\$3,256.00	\$1,000.00	\$2,256.00
Ĭ	Creditor's Name	Living Room Set			
	Atta. Danlen mta.				
	Attn: Bankruptcy Po Box 565848	As of the date you file, the claim is: Check all that			
	Dallas, TX 75356	apply. □ Contingent			
-	Number, Street, City, State & Zip Code	Unliquidated			
		☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
■ De	ebtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
□ De	ebtor 2 only	car loan)			
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	least one of the debtors and another	<u> </u>			
	neck if this claim relates to a ommunity debt	Other (including a right to offset)			

0001

Last 4 digits of account number

Opened 6/21/18 Last Active

Date debt was incurred 6/29/18

Debtor 1	Andrell Dicole Hall		Case number (if known)					
•	First Name Middle N	ame Last Name	_					
フラー	dgecrest Credit npany, LLC	Describe the property that secures the claim:	\$15,946.00	\$8,475.00	\$7,471.00			
	tor's Name	2017 Chevrolet Sonic 69000 miles						
730	n: Bankruptcy 0 E Hampton Ave, Ste	As of the date you file, the claim is: Check all that						
100		apply.						
	sa, AZ 85209	Contingent						
Numb	per, Street, City, State & Zip Code	Unliquidated						
Who owo	s the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.						
_		_						
Debtor	2 only	 An agreement you made (such as mortgage or s car loan) 	secured					
☐ Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)						
At least	one of the debtors and another	☐ Judgment lien from a lawsuit						
	if this claim relates to a unity debt	Other (including a right to offset)						
Date debt	Opened 09/18 Last Active 3/30/19	Last 4 digits of account number 2001	1					
2.3 Pro	gressive Leasing	Describe the property that secures the claim:	\$0.00	\$350.00	\$0.00			
	tor's Name	Table, Chairs, Household Accessories						
	West Data Drive per, UT 84020	As of the date you file, the claim is: Check all that apply. Contingent	I					
Numb	per, Street, City, State & Zip Code	☐ Unliquidated						
		☐ Disputed						
Who owes	s the debt? Check one.	Nature of lien. Check all that apply.						
■ Debtor	1 only	■ An agreement you made (such as mortgage or s	secured					
Debtor 2	2 only	car loan)						
☐ Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)						
☐ At least	one of the debtors and another	☐ Judgment lien from a lawsuit						
	if this claim relates to a unity debt	Other (including a right to offset)						
Date debt	was incurred	Last 4 digits of account number						
Add the	dollar value of your entries in C	column A on this page. Write that number here:	\$19,202.00					
If this is	the last page of your form, add	the dollar value totals from all pages.	\$19,202.00	-				
Write tha	at number here:		φ13,202.00					

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				ocument	Page 27 of (<u> </u>	i			
Fill	l in this inform	ation to identify your o	case:							
De	btor 1	Andrell Dicole Ha	II							
		First Name	Middle Nar	ne	Last Name					
	btor 2 ouse if, filing)	First Name	Middle Nar	ne	Last Name					
Un	ited States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF GI	EORGIA - ATLANTA	DIVISION				
	se number							Check	f this is an	ı
								amend	ed filing	
∩f	ficial Form	106E/E								
		 F: Creditors W	ho Have I	Insecured	Claims				12/15	
any Sch Sch left.	executory contra edule G: Executo edule D: Creditor	accurate as possible. Us acts or unexpired leases ory Contracts and Unexpirs Who Have Claims Secunation Page to this pag ber (if known).	that could resul ired Leases (Off ured by Property	t in a claim. Also I icial Form 106G). D r. If more space is	ist executory contract To not include any cre needed, copy the Part	ts on Schedule A/B: Feditors with partially s t you need, fill it out,	Property (Of secured clain number the	fficial Forr ims that a entries in	n 106A/B) a re listed in the boxes	ind on
Pa	rt 1: List All	of Your PRIORITY Un	secured Claim	ıs						
1.	Do any creditor	s have priority unsecured	d claims against	you?						
	☐ No. Go to Pa	rt 2.								
	Yes.									
2.	identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both priority and r according to the	d nonpriority amoun creditor's name. If	ts, list that claim here a you have more than tw	and show both priority a	ind nonprior	ity amount	s. As much	as
	(For an explanat	ion of each type of claim, s	ee the instruction	s for this form in the	e instruction booklet.)					
						Total claim	Priority amount		Nonpriorit amount	У
2.1	3	Department of Reve	enue Las	t 4 digits of accou	nt number	\$0.00		\$0.00		\$0.00
	•	nce Division	Wh	en was the debt in	curred?					
	1800 Cer	ankruptcy ntury BLVD NE Suit GA 30345-3202	e 9100				-			
		eet City State Zip Code	As	of the date you file	, the claim is: Check a	all that apply				
	Who incurred	the debt? Check one.		Contingent						
	Debtor 1 on	ıly		Unliquidated						
	Debtor 2 on	ıly		Disputed						
	Debtor 1 an	d Debtor 2 only	Тур	e of PRIORITY un	secured claim:					
	☐ At least one	of the debtors and anothe	_r 🗆	Domestic support o	bligations					
	☐ Check if th	is claim is for a commun	nity debt	Taxes and certain o	ther debts you owe the	government				
	Is the claim su	ıbject to offset?		Claims for death or	personal injury while yo	ou were intoxicated				
	■ No			Other. Specify						

Notice Only

☐ Yes

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Debtor 1 Andrell Dicole Hall Case number (if known) \$0.00 2.2 \$0.00 IRS Last 4 digits of account number \$0.00 Priority Creditor's Name 401 W. Peachtree St., NW When was the debt incurred? Stop #334-D Room 400 Atlanta, GA 30308 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes **Notice Only** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of **Total claim** 4.1 **Banfield Pet Hospital** Last 4 digits of account number 7940 \$200.00 Nonpriority Creditor's Name 650 Ponce De Leon Ave NE 2016 When was the debt incurred? Atlanta, GA 30308 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Service Deficiency

☐ Yes

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Page 29 of 61 Case number (if known) **Document** Debtor 1 Andrell Dicole Hall 4.2 \$245.00 **Charter Communications** Last 4 digits of account number 1282 Nonpriority Creditor's Name 12405 Powerscourt Dr When was the debt incurred? Saint Louis, MO 63131 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other, Specify Collections Agency for Spectrum Internet ☐ Yes 4.3 Citibank \$1,205.00 Last 4 digits of account number Nonpriority Creditor's Name Legal Dept/Bankruptcy When was the debt incurred? PO Box 6241 Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.4 Comenitybank/New York Last 4 digits of account number \$579.00 7964 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/18 Last Active Po Box 18215 When was the debt incurred? 4/13/19 Columbus, OH 43218 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

□ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Charge Account ☐ Yes

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Page 30 of 61 Case number (if known) **Document** Debtor 1 Andrell Dicole Hall 4.5 \$1,032.00 Credit Adjustment Inc. Last 4 digits of account number Nonpriority Creditor's Name Attn: Legal Dept/Bankruptcy When was the debt incurred? 11/06/2017 330 Florence Street Defiance, OH 43512 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections Agency ☐ Yes 4.6 **Emory Adventist Hospital** Last 4 digits of account number \$1,533.00 Nonpriority Creditor's Name c/o Kevin B Wilson Law Offices When was the debt incurred? 12/20/2017 2810 Walker Road Suite 102 Chattanooga, TN 37421 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collections Attorney for Medical Service** ☐ Yes Other. Specify **Deficiencies** 4.7 Gables Residential Services, Inc. Last 4 digits of account number \$711.00 Nonpriority Creditor's Name 2101 Paces Ferry Road SE When was the debt incurred? Smyrna, GA 30080 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

Other, Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Apartment Deficiency

Is the claim subject to offset?

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Debtor 1 Andrell Dicole Hall Case number (if known) 4.8 \$300.00 **Geico Choice Insurnace Company** Last 4 digits of account number Nonpriority Creditor's Name 5260 Western Avenue When was the debt incurred? Chevy Chase, MD 20815 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Insurance Premium Deficiency** ☐ Yes Other. Specify 4.9 Georgia's Own Credit Union \$125.00 Last 4 digits of account number 7185 Nonpriority Creditor's Name Reg. Agent: David Preter When was the debt incurred? 06/2018 100 Peachtree Street **Suite 2800** Atlanta, GA 30375-0001 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Overdraft Fees** Other. Specify 4.1 **Golds Gym** \$150.00 Last 4 digits of account number Nonpriority Creditor's Name 4001 Maple Avenue When was the debt incurred? 06/2016 Suite 200 Dallas, TX 75219 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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4.1 1	JD Receivables LLC	Last 4 digits of account number	\$910.00
	Nonpriority Creditor's Name PO Box 382656	When was the debt incurred? 12/29/2017	
	Germantown, TN 38183 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify	
4.1	Jefferson Capital Systems LLC	Last 4 digits of account number	\$2,294.00
	Nonpriority Creditor's Name PO Box 7999	When was the debt incurred? 10/31/2017	
	Saint Cloud, MN 56302-9617	10/01/2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collections Agency// Multiple Accounts	
4.1 3	Kay Jewelers Nonpriority Creditor's Name	Last 4 digits of account number	\$364.00
	Legal Dept/Bankruptcy 375 Ghent Road Akron, OH 44333	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	- 117	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge Account	
		— Other Opcomy	

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4.1 4	KeyBank, N.A.	Last 4 digits of account number	7771	\$606.00
	Nonpriority Creditor's Name (Oh-01-51-0622) 4910 Tiedeman Road Brooklyn, OH 44144	When was the debt incurred?	Opened 05/13 Last Active 01/15	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	or plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	LabCorp	Last 4 digits of account number		\$1,000.00
	Nonpriority Creditor's Name P.O. Box 2240 Purlington, NC 27216, 2240	When was the debt incurred?		
	Burlington, NC 27216-2240 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Services		
4.1	PayPal Credit	Last 4 digits of account number		\$435.00
	Nonpriority Creditor's Name PO Box 105658 Atlanta, GA 30348	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	- '	
	☐ Yes	Other. Specify Charge Acc	count	

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Portfolio Recovery Associates, LLC	Last 4 digits of account number	\$553.00
Nonpriority Creditor's Name PO Box 41067	When was the debt incurred? 11/07/2017	
Norfolk, VA 23541		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Collections Agency for PRA Receiveables Management, LLC	
Progressive Direct Auto	Last 4 digits of account number 7412	\$650.00
Nonpriority Creditor's Name P.O. Box 31260 Tampa, FL 33631	When was the debt incurred? 01/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Insurance Premium Deficiency	
Santander Consumer USA Inc.	Last 4 digits of account number	\$17,179.00
Nonpriority Creditor's Name PO Box 961245 Fort Worth, TX 76161	When was the debt incurred? 09/14/2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Automobile Deficiency 2011 Hyundai Cother. Specify Elantra	

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☐ Yes

debt

■ No

Type of NONPRIORITY unsecured claim:

■ Other. Specify Personal Loan

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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3	TRUEACCORD CORP.	Last 4 digits of account number 9125	\$683.00
	Nonpriority Creditor's Name 303 Second Street Suite750	When was the debt incurred?	
	San Francisco, CA 94107 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acount	
4.2	US Department of Education/Great Lakes	Last 4 digits of account number 8581	\$14,471.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison, WI 53707	Opened 05/12 Last Active 12/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	Educational		
4.2 5	US Dept of Education	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Claims Filing Unit PO Box 8973	When was the debt incurred?	
	Madison, WI 53708 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Educational// Notice Only	

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Page 37 of 61 Case number (if known) Debtor 1 Andrell Dicole Hall

4.2 6	/erizon		Last 4 digits of account number			\$673.00
N C 4	515 N San	an InfoSource LP ta Fe Ave	When was the debt incurred?	10/27	/2017	
<u>C</u>	Oklahoma (City, OK 73118 City State Zip Code	As of the date you file, the claim	is: Chack	all that apply	
		the debt? Check one.	As of the date you me, the dam	is. Officer	ι αιι ιται αρριγ	
	Debtor 1 on	ly	☐ Contingent			
	Debtor 2 onl	ly	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if thi	s claim is for a community	☐ Student loans			
	lebt s the claim su	bject to offset?	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did not	
_	No	•	Debts to pension or profit-shari	ng plans, a	and other similar debts	
	☐ Yes		■ Other. Specify Collection			
4.2	Nolletar Ho	alth System Inc				\$1,000,00
	Jonpriority Cred	alth System, Inc.	Last 4 digits of account number			\$1,000.00
P	P.O. Box 74		When was the debt incurred?			
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
W	Vho incurred t	the debt? Check one.				
	Debtor 1 on	ly	☐ Contingent			
	Debtor 2 onl	ly	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
		s claim is for a community	Student loans			
	lebt s the claim su	bject to offset?	☐ Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did not	
_	■ No	bject to offset!	Debts to pension or profit-shari	na nlans a	and other similar debts	
	⊒ Yes		■ Other. Specify Medical Se		and outer enimal debte	
	_ 165		Other. Specify			
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed			
is trying have mo	to collect fro ore than one of for any debts	m you for a debt you owe to som		n Parts 1	or 2, then list the collection agency	here. Similarly, if you
6. Total the	e amounts of	certain types of unsecured claim	s. This information is for statistical	reporting	purposes only. 28 U.S.C. §159. Add	the amounts for each
type of u	unsecured cla	nim.				
		-			Total Claim	
Tot		Domestic support obligations		6a.	\$0.00	
clain from Part		Taxes and certain other debts	ou owe the government	6b.	\$ 0.00	
	6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$ 0.00	
	6d.	Other. Add all other priority unser	cured claims. Write that amount here.	6d.	\$	
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	
					Total Claim	
	6f.	Student loans		6f.	\$ 14,471.00	
Tot						
clain from Part		Obligations arising out of a sep you did not report as priority cl	paration agreement or divorce that aims	6g.	\$0.00	

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Debtor 1 Andrell Dicole Hall

6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 33,780.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 48,251.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Andrell Dicole Ha	all		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISION	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 American First Finance
Attn: Bankruptcy
Po Box 565848
Dallas, TX 75356

State what the contract or lease is for
Furniture Lease-- Living Room Couch, Lamp
Acct# 1000050906600001
Opened Opened 6/21/18 Last Active 6/29/18

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Fill in this info	rmation to identify your	case:			
Debtor 1	Andrell Dicole Ha				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA	DIVISION	
Case number					– 0
(II KHOWH)					Check if this is an amended filing
Official F	orm 106H				-
	e H: Your Cod	ebtors			12/15
our name and	case number (if known)	. Answer every question			of any Additional Pages, write
			operty state or territory? erto Rico, Texas, Washing		states and territories include
■ No. Go t		use, or legal equivalent live	with you at the time?		
in line 2 aç	gain as a codebtor only i 0), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make sur	e you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fil
	mn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
246 Tole	thia Stallworth Shepler Street do, OH 43609 signer on 2017 Chevro	olet Sonic 69000 miles		■ Schedule D, line □ Schedule E/F, li □ Schedule G □ Rridgecrest Cred	ine

Schedule H: Your Codebtors

Fill	in this information to i	dentify your ca	ise:				1				
		Andrell Dico									
	btor 2										
Uni	ited States Bankruptc	y Court for the:	NORTHERN DISTRIC	CT OF GEORGIA -	ATLANTA	_					
(If kr	se number								ed filing ent showir	ng postpetition ollowing date:	
	fficial Form 1						ī	MM / DD/ \	YYYY		
S	chedule I: Y	our Inco	ome								12/15
spo atta	use. If you are separ ch a separate sheet	rated and your to this form. C Employment	are married and not filing wing spouse is not filing wing with the top of any additi	ith you, do not inc	lude infor	mati	on abou	it your spoumber (if	ouse. If m known). <i>I</i>	ore space is	needed,
	If you have more that	an one ioh		■ Employed				☐ Empl		3 1	
	attach a separate painformation about a	age with	Employment status	☐ Not employed					employed		
	employers.		Occupation	Insurance Sale	es						
	Include part-time, se self-employed work		Employer's name	Combined Ins of America	urance C	om	pany				
	Occupation may incor homemaker, if it		Employer's address	111 E upper W Chicago, IL 60		rive					
			How long employed t	here? 10 mc	onths			_			
Pai	rt 2: Give Detai	ls About Mon	thly Income								
	mate monthly incomuse unless you are se		te you file this form. If	you have nothing to	report for	any	line, writ	e \$0 in the	space. In	clude your no	n-filing
,	ou or your non-filing sp e space, attach a sep		re than one employer, co	ombine the informat	ion for all e	empl	oyers fo	r that perso	on on the I	ines below. If	you need
							For De	ebtor 1		ebtor 2 or ing spouse	
2.			y, and commissions (be alculate what the monthl		2.	\$	3	3,049.00	\$	N/A	
3.	Estimate and list n	nonthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross In	come. Add line	e 2 + line 3.		4.	\$	3,0	49.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Andrell Dicole Hall	_	Cas	se number (if knov	vn)				
				F	or Debtor 1			ebtor		
	Сор	y line 4 here	4.	\$	3,049.0	00	\$	9 0	N/A	_
5.	List	all payroll deductions:								
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a. 5b. 5c.	\$ \$ \$	253.0 0.0 0.0	00	\$ \$		N/A N/A N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$	0.0 252.0)0)0	\$		N/A N/A	-
	5f. 5g. 5h.	Domestic support obligations Union dues Other deductions. Specify:	5f. 5g. 5h	\$ \$ + \$	0.0 0.0 0.0	00	\$ + \$		N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	505.0	00	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,544.0	00	\$		N/A	_
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.	\$	219.0 0.0 0.0 0.0 0.0	00 00 00	\$ \$ \$ \$		N/A N/A N/A N/A	- - - -
	8g. 8h.	Pension or retirement income Other monthly income. Specify: Part-Time Job (Uber/Lyft)	8g. 8h	\$ + \$	0.0 300.0		* - \$		N/A N/A	_
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	519.0		\$		N/A	_
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	<u> </u>	3,063.00 +	\$_		N/A	= \$ _	3,063.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper					chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	3,063.00
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes Explain:	?						Combi month	ned y income

Official Form 106l Schedule I: Your Income page 2

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In re	Andrell Dicole Hall	Case No.	

Debtor(s)

SCHEDULE I - YOUR INCOME Attachment A

Business Income: (Gross)

Interior Design: \$531

Business Expenses:

- Website: \$25.00

- Merchandise: \$100.00

- State Registration: \$7.00

- Transportation: \$100.00

- Business Phone: \$30.00

-Shipping/Postage: \$50.00

Total: \$312

Business Income (Net): \$219

Fill	in this informa	ation to identify yo	our case:					
Deb		Andrell Dico				Che	eck if this is:	
Deh	tor 2						An amended filing	ving postpetition chapter
	ouse, if filing)						13 expenses as of	
Unite	ed States Bankı	ruptcy Court for the		HERN DISTRICT OF GEOF TA DIVISION	RGIA -		MM / DD / YYYY	
1	e number nown)							
		orm 106J				•		
		J: Your			- Clin - to - dh - n h	- ()		12/1
info	ormation. If manual manual member (if know		eded, attary questio	. If two married people ar ich another sheet to this n.				
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do vour exi	penses include	_	N.				☐ Yes
	expenses o	f people other t d your depende	han $_{oldsymbol{\sqcap}}$	No Yes				
exp	imate your ex	nate Your Ongoi expenses as of your a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed the second	orm as a s J, check t	upplement in a Cha	apter 13 case to report f the form and fill in the
the		h assistance an		government assistance in cluded it on <i>Schedule I:</i> Y			Your exp	enses
•		,						
4.		or home owners and any rent for th		ises for your residence. In or lot.	nclude first mortgage	e 4.	\$	1,060.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	·	0.00
	•	erty, homeowner's				4b.	·	20.00
		e maintenance, re eowner's associat	•	upkeep expenses		4c. 4d.		0.00
5.				our residence, such as ho	me equity loans	4a. 5.		0.00

ebtor 1	Andrell Dicole Hall	Case num	ber (if known)	
. Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	115.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify: Cellular Phone	6d.	\$	110.00
	Alarm (Ring Doorbell)		\$	3.00
	Internet		\$	50.00
Food	I and housekeeping supplies		\$	308.00
	dcare and children's education costs	8.	·	0.00
	ning, laundry, and dry cleaning	9.		50.00
	onal care products and services	10.	·	50.00
	cal and dental expenses	11.	·	10.00
	sportation. Include gas, maintenance, bus or train fare.		Ψ	10.00
	ot include car payments.	12.	\$	350.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.		0.00
i. Insu	•			0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	30.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	280.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Spec		16.	\$	0.00
	Illment or lease payments:		·	
	Car payments for Vehicle 1	17a.	\$	477.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Rent to Own (American First Finance)	17c.		100.00
	Other. Specify: Rent to Own (Progressive Leasing)	17d.		50.00
	payments of alimony, maintenance, and support that you did not report as		<u> </u>	30.00
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec		19.	·	
). Othe	r real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	r: Specify:	21.		0.00
			_	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,063.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,063.00
	of the control of the			<u> </u>
	ulate your monthly net income.	00:	¢.	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,063.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,063.00
00 -	College of the same and the sam			
23C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	0.00
For ex	ou expect an increase or decrease in your expenses within the year after your expenses within the year after your expenses within the year after your expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?	ou file this	s form?	ease or decrease because c
■ N				
- IV				

Fill in this infor	rmation to identify your	case:		
Debtor 1	Andrell Dicole Ha			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	ankruptcy Court for the:	NORTHERN DIST	TRICT OF GEORGIA - ATLANTA DIVISION	_
Case number (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	riduals Filing Under Cha	pter 7 12/15
creditors have lease. You must file the	ever is earlier, unless th	ur property, or nd the lease has no ithin 30 days after		
	people are filing together and date the form.	in a joint case, bo	th are equally responsible for supplying corre	ect information. Both debtors must
	and accurate as possib your name and case nun		needed, attach a separate sheet to this form	. On the top of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims		
		art 1 of Schedule D	: Creditors Who Have Claims Secured by Pro	perty (Official Form 106D), fill in the
information b Identify the cr	pelow. reditor and the property the	nat is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Creditor's name:	American First Financ	;e	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt	f Living Room Set		■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's [Bridgecrest Credit Co	mpany, LLC	☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description of	miles	nic 69000	 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
securing debt	Trogressive Leasing		☐ Surrender the property.	
name:	i rogressive Leasilly		☐ Retain the property and redeem it.	
Description of property	Table, Chairs, Hou Accessories	sehold	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

al Form 106G), fill is not yet ended.
e assumed?
any personal
_ :

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Fill in this inform	nation to identify your	case:	ags s- s-	
Debtor 1	Andrell Dicole Ha	ill		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA D	DIVISION
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	16,200.00
Pai	t 2: Summarize Your Liabilities		
		Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	19,202.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	48,251.00
	Your total liabilities	\$	67,453.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,063.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,063.00
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 04/30/19 15:18:23 **Desc Main** Case 19-56657-jrs Doc 1 Filed 04/30/19 Page 49 of 61 Case number (if known) Document

Debtor 1 Andrell Dicole Hall

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,960.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	14,471.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	14,471.00

Fill in this infor	mation to identify your	case.				
Debtor 1	Andrell Dicole Ha					
Debtor 1	First Name	Middle Name	Las	t Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEOR	GIA - ATLANTA DIVISIO	N	
Case number						
(if known)						Check if this is an amended filing
You must file the	is form whenever you fi	n connection with a bank	s or amend	ed schedules. Making a	a false statei	ment, concealing property, or), or imprisonment for up to 20
Sig	ın Below					
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help	you fill out bankruptcy	y forms?	
■ No						
☐ Yes.	Name of person					ruptcy Petition Preparer's Notice, and Signature (Official Form 119
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and s	chedules filed with this	s declaratio	n and
X /s/ And	drell Dicole Hall		х			
Andre	II Dicole Hall ure of Debtor 1			Signature of Debtor 2		
Date	April 30, 2019			Date		

Filli	n this information to identify your case:		C	heck or	ne hox only as d	irected in this form and	lin Form
	tor 1 Andrell Dicole Hall			22A-1S			I III I OIIII
	<u> </u>			_			
	tor 2sif filing)			■ 1. 7	There is no pres	umption of abuse	
Unit	ed States Bankruptcy Court for the: NORTHERN D GEORGIA - AT	ISTRICT OF LANTA DIVISION			applies will be n	o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2).	•
Cas (if kno	e number					does not apply now be service but it could ap	
				☐ Ch	neck if this is a	n amended filing	
Off	icial Form 122A - 1						
Ch	apter 7 Statement of Your C	urrent Month	ly In	com	е		12/15
attacl case	complete and accurate as possible. If two married peop in a separate sheet to this form. Include the line number that include the line number (if known). If you believe that you are exempted tying military service, complete and file Statement of Execute: Calculate Your Current Monthly Income	to which the additional info from a presumption of abo	ormationuse beca	applies	. On the top of a	ny additional pages, wri narily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one	only.					
	■ Not married. Fill out Column A, lines 2-11.						
	\square Married and your spouse is filing with you. Fil	I out both Columns A and	d B, line	s 2-11.			
	Married and your spouse is NOT filing with you	, ,					
	Living in the same household and are not le				, ,		
	Living separately or are legally separated. Fee penalty of perjury that you and your spouse alliving apart for reasons that do not include evants.	re legally separated unde	er nonba	ankrupto	y law that appli	es or that you and your	
10 th	Il in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the e 6 months, add the income for all 6 months and divide the trouses own the same rental property, put the income from the	6-month period would be Ma otal by 6. Fill in the result. D	arch 1 thro	ough Augude any	gust 31. If the amoint m	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Colui Debt		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime payroll deductions).			II \$	3,049.00	\$	
3.	Alimony and maintenance payments. Do not inclu Column B is filled in.	ide payments from a spo	use if	\$	0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your housel and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3	ort. Include regular controlling to the control of	ibutions arents,		0.00	\$	
5.	Net income from operating a business, profession	on, or farm Debtor 1					
	Cross receipts (before all deductions)	\$ 250.00					
	Cross receipts (before all deductions)	\$ 170.00	-				
	Net monthly income from a business,		Copy here -	. ¢	80.00	\$	
6.	profession, or farm Net income from rental and other real property		-			Ψ	
		Debtor 1					
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
	Ordinary and necessary operating expenses	0.00	v here -	· \$	0.00	\$	
_	Net monthly income from rental or other real propert	у \$ООО Сор	y nere .		0.00	\$	
7.	Interest, dividends, and royalties			\$	0.00	·	

Official Form 122A-1

Debtor 1 Andrell Dicole Hall Case number (if known)

					umn A otor 1		Column Debtor	_	
8.	Unemployment compensation			\$		0.00	\$	ng opodoo	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a bene	fit under	· —			·		
		0.	00						
	For you \$ For your spouse \$								
	Pension or retirement income. Do not include any ambenefit under the Social Security Act.			\$_		0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or internationa	nts I or						
	Uber/Lyft			\$_	:	300.00	\$		
	Business Income			\$_		531.00	\$		
	Total amounts from separate pages, if any.		+	\$_		0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	3,96	0.00	+		= \$	3,960.00
Part	2: Determine Whether the Means Test Applies to	o You						Total incom	current monthly
12.	Calculate your current monthly income for the year	. Follow these steps:							
	12a. Copy your total current monthly income from line 1	11			Сору	line 11 l	nere=>	\$	3,960.00
	Multiply by 12 (the number of months in a year)							X	
	12b. The result is your annual income for this part of the	e form						12b. \$	47,520.00
13.	Calculate the median family income that applies to	you. Follow these ste	os:						
	Fill in the state in which you live.	GA							
	Fill in the number of people in your household.	1							
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link s				te instruc		13. \$	47,953.00
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	neck box	1, <i>T</i>	here is r	no presum	nption of a	buse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pr	esum	ption of	abuse is	determine	ed by Form 1	22A-2.
Part	3: Sign Below								
	By signing here, I declare under penalty of perjury	that the information o	n this sta	ateme	ent and i	n any atta	achments	is true and c	orrect.
	X /s/ Andrell Dicole Hall								
	Andrell Dicole Hall								
	Signature of Debtor 1								
	Date April 30, 2019 MM / DD / YYYY								
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.							
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.							

United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

In re	Andrell Dicole Hall	Debtor(s)	Case No. Chapter	7			
	VERIFICATION OF CREDITOR MATRIX						
The ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and corre	ect to the best	of his/her knowledge.			
Date:	April 30, 2019	/s/ Andrell Dicole Hall					
		Andrell Dicole Hall Signature of Debtor					

American First Finance Attn: Bankruptcy Po Box 565848 Dallas, TX 75356

Banfield Pet Hospital 650 Ponce De Leon Ave NE Atlanta, GA 30308

Bridgecrest Credit Company, LLC Attn: Bankruptcy 7300 E Hampton Ave, Ste 100 Mesa, AZ 85209

Charter Communications 12405 Powerscourt Dr Saint Louis, MO 63131

Citibank Legal Dept/Bankruptcy PO Box 6241 Sioux Falls, SD 57117

Comenitybank/New York Attn: Bankruptcy Po Box 18215 Columbus, OH 43218

Credit Adjustment Inc. Attn: Legal Dept/Bankruptcy 330 Florence Street Defiance, OH 43512

Cynthia Stallworth 246 Shepler Street Toledo, OH 43609

Emory Adventist Hospital c/o Kevin B Wilson Law Offices 2810 Walker Road Suite 102 Chattanooga, TN 37421

Gables Residential Services, Inc. 2101 Paces Ferry Road SE Smyrna, GA 30080

Geico Choice Insurnace Company 5260 Western Avenue Chevy Chase, MD 20815

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

Georgia's Own Credit Union Reg. Agent: David Preter 100 Peachtree Street Suite 2800 Atlanta, GA 30375-0001

Golds Gym 4001 Maple Avenue Suite 200 Dallas, TX 75219

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

JD Receivables LLC PO Box 382656 Germantown, TN 38183

Jefferson Capital Systems LLC PO Box 7999 Saint Cloud, MN 56302-9617

Kay Jewelers Legal Dept/Bankruptcy 375 Ghent Road Akron, OH 44333

KeyBank, N.A. (Oh-01-51-0622) 4910 Tiedeman Road Brooklyn, OH 44144 LabCorp P.O. Box 2240 Burlington, NC 27216-2240

PayPal Credit PO Box 105658 Atlanta, GA 30348

Portfolio Recovery Associates, LLC PO Box 41067 Norfolk, VA 23541

Progressive Direct Auto P.O. Box 31260 Tampa, FL 33631

Progressive Leasing 256 West Data Drive Draper, UT 84020

Santander Consumer USA Inc. PO Box 961245 Fort Worth, TX 76161

Sprint 6200 Sprint Parkway Overland Park, KS 66251

State Farm Insurance 1 State Farm Plz Suite D3 Bloomington, IL 61710

The Huntington National Bank PO Box 89424 Cleveland, OH 44101

TRUEACCORD CORP.
303 Second Street
Suite750
San Francisco, CA 94107

US Department of Education/Great Lakes Attn: Bankruptcy Po Box 7860 Madison, WI 53707

US Dept of Education Attn: Claims Filing Unit PO Box 8973 Madison, WI 53708

Verizon c/o American InfoSource LP 4515 N Santa Fe Ave Oklahoma City, OK 73118

Wellstar Health System, Inc. P.O. Box 742625 Atlanta, GA 30374-2625

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.